



PRE-SUBMITTAL CONFERENCE

REQUEST FOR QUALIFICATIONS (RFQ) NO. S72-Q29633

RESIDENTIAL REPAIR AND CHORE MAINTENANCE SERVICES HOUSTON HEALTH DEPARTMENT

**TUESDAY, JULY 13, 2021
@10:00 AM**

*** Please mute your phone,
please do not make
announcement upon meeting
connection, thank you.**

AGENDA

- | | |
|--|--------------------------|
| I. Opening Remarks | Raquel Rosa |
| II. Disclaimer Statement | Raquel Rosa |
| III. Office of Business Opportunity | Raquel Rosa |
| IV. RFQ Submission Requirements | Raquel Rosa |
| V. Scope of Work Review | Health Department |
| VI. Closing Remarks | Raquel Rosa |

I. OPENING REMARKS

I. Sign-in Sheet

- ❑ After the teleconference, the Contractor shall send an email to Raquel.rosa@houstontx.gov, use the Excel sheet titled *Q29633 Pre-Submittal Sign-in Sheet*, provided in the Ebid system, to provide the following information:

Company name, contact person, valid email and phone no.

- ❑ A consolidated sign-in sheet will be created from the information provide and will be posted to the City of Houston E-Bid System that will be available for all interested Contractors to view.

I. OPENING REMARKS

II. No Contact/Quiet Period

- ☐ From upon issuance of the solicitation advertisement through the pre-award phase and up to the date the City Secretary publicly posts notice of any City Council agenda decisions regarding this project, all correspondence should be routed through the Project Manager, Raquel Rosa.
- ☐ Contractors, please do not attempt to contact any City of Houston employees in regards to this solicitation, other than Raquel Rosa.

II. GENERAL DISCLAIMER STATEMENT

This document serves to aid interested Vendors/Contractors doing business with the City of Houston. This document does not constitute legal advice or bind the City of Houston in any manner. Anything stated at this pre-submittal conference is not intended to change any terms and/or conditions stated in the advertised solicitation document. Any authorized changes will be made in writing in the form of a letter of clarification issued by the City of Houston Strategic Procurement Division (SPD).

III. OFFICE OF BUSINESS OPPORTUNITY

- ☐ Pay or Pay
(Required by the awarded Contractors only)

- ☐ You may review, get additional information, and/or download forms at their website: www.houstontx.gov/obo

IV. RFQ SUBMISSION REQUIREMENTS

- ☐ Instructions for Submission
- ☐ Submittal Contents Requirements
- ☐ Submittal Packet Checklist
- ☐ Example Response Forms
- ☐ Service Map Guide
- ☐ Evaluation Matrix

Instructions for Submission

General Instructions

Number of Copies. Submit **one (1)** hard copy of your submittal, for the one (1) hard copy, please print and submit it marked ORIGINAL. Also, submit a signed in **BLUE** ink and notarized the **Offer and Submittal Exhibit 1-A** form. In addition, submit **five (5)** NON-PASSWORD PROTECTED electronic thumb drives with copies of the submittal packet contents and submit in a separate sealed envelope clearly labeled the title of the RFQ, located on the first page of this solicitation document.

***Submit one (1) hard copy of the financials and one (1) electronic copy both in a separate envelope marked FINANCIALS clearly labeled the title of the RFQ.

Send labeled response documents to the following address:

City Secretary's Office
S72-Q29633 Residential repair and Chore Maintenance
City Hall Annex, Public Level
900 Bagby Street Houston, Texas 77002

The City of Houston shall bear no responsibility for submitting responses on behalf of any Respondent. Respondent(s) may submit their submittal to the City Secretary's Office any time prior to the stated deadline.

Submittal Contents Requirements

- ❑ **Submittal Packet Requirements:** This section details the requirements for submitting all required information, to ensure some degree of uniformity in the submittal packet, please tab sections accordingly and follow the outline listed below.
- ❑ In addition, **please complete and submit Attachment B-3, Submittal Packet Requirements Checklist;** indicating that you have completed and included each of these required forms/materials in **Part VI (six), Submittal Packet Requirements, Sections 1.0 through 18.0,** with your submittal packet. Attach the completed checklist to your transmittal letter at the front of your packet.
- ❑ Respondent(s) bidding for more than one service option must submit a submittal packet, per service option, to include the following **section, Part VI (six), Submittal Packet Requirements, Sections 1.0 through 18.0.** Respondent must complete and submit all **applicable** sections as noted above and as outlined in the specified sections of **Part VI, Submittal Packet Requirements.** If a section is **not applicable**, please do not include it in the submittal and mark N/A on the checklist.

- 1.0 Letter of Transmittal:** The letter of transmittal should be limited to a maximum of two (2) pages and should include the following:
- 1.1 A brief statement of the Respondent's understanding of the work to be performed and that the Respondent will comply with the requirements set forth in this RFQ.
 - 1.2 A "Certificate of Authority" statement signed by the binding partner of the company. The statement should list the specific persons who are authorized to execute agreements on behalf of the Respondent's company.
 - 1.3 The letter of transmittal shall be signed by a person(s) authorized to legally bind the Respondent and shall contain a statement that the Submittal contained therein shall remain firm for a period of 120 days from and after the date of Response submittal.
- 2.0 Statement of Interest:** Respondent(s) shall submit a statement of interest that indicates the Respondent(s) interest in providing the requested services to the City. The City intent of this solicitation is to enter into a new agreement with one or more qualified providers for the provision of all services relating to providing residential and chore maintenances.
- 2.1 Respondent(s) must specify in the **Statement of Interest**, one of the below program service options that Respondent(s) wants to be considered. There are two (2) distinct service options to be considered, please see the following:
 - Service Option 1- Residential Repair Services
 - Service Option 2- Chore Maintenance Services
 - 2.2 Respondent(s) bidding for more than one service option must submit a separate Statement of Interest **per service option** to be considered for.

- 3.0 Offer and Submittal:** The Offer and Submittal form must be **signed and notarized** in **BLUE** ink by an authorized representative(s) of the Respondent, which must be the actual legal entity that will perform the contract if awarded and therein shall remain firm for a period of 180 days. Complete and submit **Exhibit I-A**, provided in the solicitation.
- 4.0 Qualifications:** Respondent(s) shall demonstrate professional qualifications and knowledge in the organization. At minimum the submittal packet shall address the following:
- 4.1 Track Record: Provide a brief overview of your organization’s background history to include, number of years in providing similar services, federal tax ID number, total number of employees, organizational chart and resumes of the key personnel proposed to deliver the services in this RFQ for the City.
 - 4.2 Capacity: Describe your organization’s capacity to deliver proposed services consistent with the OAA priorities.
 - 4.3 Training: 4.3 Provide details of the organization’s training program and how staff training is maintained. Where applicable, Respondent shall identify their staff.
 - 4.4 Service Area: Describe the geographical availability of the proposed service, respondent shall reference Attachment B-2, *Harris County Area Service Map*, provided in the solicitation. If the proposed service to be provided is considered mobile, provider shall reference the various coverage areas of Harris County that can be serviced via the providers mobility services.

For Qualifications section, please provide a detailed response on “Form A-1”

5.0 **Experience/Collaborative Initiatives:** Respondent shall demonstrate experience relevant to the prior work performed and work partnerships. At minimum the submittal packet shall address the following:

- 5.1 **Prior Work:** Describe briefly a minimum of three (3) past and/or current projects where collaborative initiatives have enhanced and/ or expanded service capabilities and filled service gaps, if any to include prior history or work with the City or other public agencies. Provide descriptions of the projects that demonstrates your company’s relevant experience providing residential repair and chore maintenance services to an older community.

- 5.2 **References:** Provide reference information for the people directly involved in the previous projects listed above and who have first-hand knowledge of the performance of the Respondent and its proposed staff/team. The City will contact the references to verify the information Respondent provides and/or to solicit comments. Complete and submit **Exhibit I-B, References**, to list contact information for project verification.

- 5.3 **Partnerships:** Describe relationships with potential partners for the services identified in this request for qualifications, and the roles and responsibilities. In addition, the Respondent shall provide a list of subcontractors that their company proposes to engage on the designated work related to the HHD proposed contract. Complete and submit **Exhibit I-C, List of Subcontractors**, to list additional potential partnerships and/or proposed subcontractors.

For Experience/Collab. section, please provide a detailed response on “Form A-2”

6.0 **Proposed Program and Operational Design:** Respondent shall submit their approach and methodologies for fulfilling services and deliverables requirements. At minimum the submittal packet shall address the following:

- 6.1 **Proposed Program:** Describe in a brief narrative a proposed program activity and clearly define the method of approach that will be utilized in the successful achievement of the intended project scope of work. Describe the specific outcomes, please note the significant activities described in your narrative should reflect only similar activities as requested in this RFQ to be considered.

- 6.2 **Staffing Pattern:** Describe the staffing patterns of the proposed program. Indicate how many full time equivalent (FTE) employees will implement each intervention and the staff/volunteer qualifications for these positions. Describe employee recruitment and retention strategy that will be implemented to operate the proposed program.

- 6.3 **HCAAA Compliant:** Describe the organizations capacity to deliver the proposed services consistent with the HCAAA priorities.

- 6.4 **Program Available:** Explain how the organization will ensure that the proposed services are available to those persons who most need the services. Describe how your organization will promote the availability of services to targeted population.

For Program/Oper. Design section, please provide a detailed response on “Form A-3”

7.0 Evaluation/Quality Management: Respondent shall demonstrate their expertise level and resources to implement HCAAA data management practices and evaluation methods. At minimum the submittal packet shall address the following:

7.1 Data Monitoring: Write a brief narrative on the evaluation of a similar or identical service previously implemented. Include both quantitative and qualitative data to support success and challenges of process and outcomes monitoring.

7.2 Client Files: Briefly describe how your organization will use evaluation information and client feedback, to modify and/or improve your services.

7.3 Monthly Reports: Briefly describe how your organization will ensure that the data submitted to HCAAA is accurate, complete and submitted in a timely manner, to include; monthly reports and invoices.

For Eval./Quality Manage section, please provide a detailed response on “Form A-4

Financial Stability: Please provide financial statements in a separate sealed envelope, marked “Financials”.

Affidavit Information Form: Please complete and submit **Exhibit III**, provided in this solicitation

Anti-Collusion Statement: Please complete and submit **Exhibit IV**, provided in this solicitation

Conflict of Interest Questionnaire: Please complete and submit **Exhibit V**, provided in this solicitation.

Debarment Certification: Please complete and submit **Exhibit VI**, provided in this solicitation.

Exceptions to Standard Contract: Submit any exceptions to the standard contract and include the rationale for taking those exceptions. Provide rationale for objecting to each Exception, and propose alternate language for City Legal consideration. When applicable, attach license and maintenance Agreement(s).

Legal Actions: Provide a list of all pending litigation, and include a brief description of the reason for legal action. (if applicable)

Conflict of Interest: Provide information regarding any real or potential conflict of interest. Failure to address any potential conflict of interest upfront may be cause for rejection of the submittal. (If applicable)

Other: Submit any information deemed pertinent to demonstrating Respondent’s qualifications to perform the services being requested such as memberships in any professional associations, documents, examples, etc. (If applicable)

Certifications and License: Attached if applicable or certifications, where appropriate

Submittal Packet Checklist

ATTACHMENT B-3 SUBMITTAL PACKET REQUIREMENTS CHECKLIST S72-Q29633

SPONDENT'S NAME: _____ SERVICE OPTION: _____

ase check a box on each line, indicating that you have completed and included each of these required
rs/materials with your submittal packet. Per each individual service option to be considered, there should be a
pleted submittal packet requirements checklist included. Attach this checklist to your transmittal letter at the front
our submittal packet.

| # | ITEM | Yes | No | N/A |
|---|--|-----|----|-----|
| | Submit one (1) hard copy of your submittal, along with one printed original submittal add a signed in ink and notarized Offer and Submittal Exhibit 1-A form. In addition, submit five (5) NON-PASSWORD PROTECTED ELECTRONIC THUMB DRIVES | | | |
| | Part VI, Section 1.0: One (1) Letter of Transmittal and attached with one (1) Submittal Requirements Checklist, Attachment B-3. | | | |
| | Part VI, Section 2.0: Statement of Interest | | | |
| | Part VI, Section 4.0: Qualifications Form A-1 (Organization Charts & Resumes) | | | |
| | Part VI, Section 5.0: Experience/Collaborative Initiatives Form A-2 | | | |
| | Part VI, Section 6.0: Proposed Program and Operational Design Form A-3 | | | |
| | Part VI, Section 7.0: Evaluation/Quality Management Form A-4 | | | |
| | Provide the audited financial statements or Federal Tax Forms filed to the Internal Revenue Service (IRS) for the past two (2) fiscal years. At a minimum, include the letter of opinion, balance sheet, schedules, and related auditor's notes. | | | |
| | Exhibit I-B References | | | |
| 0 | Exhibit I-C Proposed Subcontractors NOT APPLICABLE | | | |
| 1 | Exhibit II – (a) Schedule of MWBE Participation; (b) MWBE Letters of Intent; (c) MWBE Subcontract Terms NOT APPLICABLE | | | |
| 2 | Exhibit III – Ownership Information Form | | | |
| 3 | Exhibit IV – POP Forms | | | |
| 4 | Exhibit V – Anti-Collusion Statement | | | |
| 5 | Exhibit VI – Conflict of Interest Questionnaire | | | |
| 6 | Exhibit VII – Debarment Certification | | | |
| 7 | Exceptions to Standard Contract (If applicable) | | | |
| 8 | Legal Actions (If applicable) | | | |
| 9 | Conflict of Interest (If applicable) | | | |
| 0 | Other Information (If applicable) | | | |
| 1 | Certifications (if applicable) | | | |
| 2 | License to Operate in Texas (where and if applicable) | | | |



RESIDENTIAL REPAIR AND CHORE MAINTENANCE SERVICES
SOLICITATION NO.: **S72-Q29633**

SECTION 4.0: QUALIFICATIONS
FORM A – 1 (LIMITED TO 6 PAGES)

ORGANIZATION: _____

SELECT THE SERVICE OPTION:

Option 1: Residential Repair _____

Option 2: Chore Maintenance Services _____

TRACK RECORD: PROVIDE A BRIEF OVERVIEW OF YOUR ORGANIZATION'S BACKGROUND HISTORY TO INCLUDE, NUMBER OF YEARS IN PROVIDING SIMILAR SERVICES, CURRENT SERVICES PROVIDED FEDERAL TAX ID #, TOTAL NUMBER OF EMPLOYEES, ORGANIZATIONAL CHART AND RESUMES OF THE KEY PERSONNEL PROPOSED TO DELIVER THE SERVICES IN THIS RFQ FOR THE CITY.

CAPACITY: DESCRIBE YOUR ORGANIZATION'S CAPACITY TO DELIVER PROPOSED SERVICES CONSISTENT WITH THE OLDER AMERICANS ACT PRIORITIES.

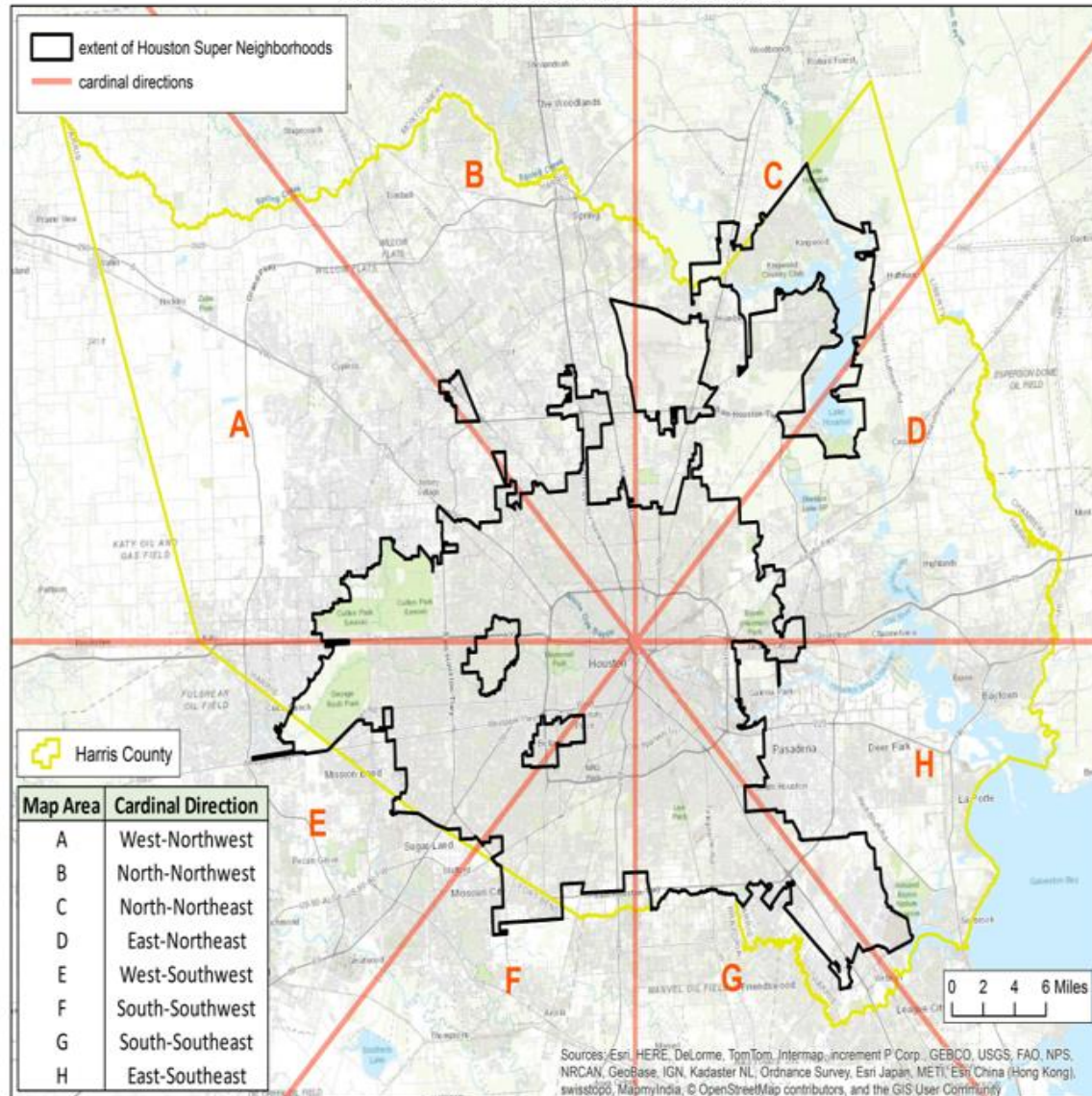
TRAINING: PROVIDE DETAILS OF THE ORGANIZATION'S TRAINING PROGRAM AND HOW STAFF TRAINING IS MAINTAINED. WHERE APPLICABLE, RESPONDENT SHALL IDENTIFY THEIR CERTIFIED STAFF, THEY MUST PROVIDE COPIES OF THE RELEVANT CERTIFICATIONS THAT ARE REQUIRED FOR THE SPECIALIZED WELLNESS AND HEALTH SERVICE.

SERVICE AREA: DESCRIBE THE GEOGRAPHICAL AVAILABILITY OF THE PROPOSED SERVICE, RESPONDENT SHALL REFERENCE ATTACHMENT 2.0, *HARRIS COUNTY AREA SERVICE MAP*, PROVIDED IN THE SOLICITATION. IF THE PROPOSED SERVICE TO BE PROVIDED IS CONSIDERED MOBILE, PROVIDER SHALL REFERENCE THE VARIOUS COVERAGE AREAS OF HARRIS COUNTY THAT CAN BE SERVICED VIA THE PROVIDERS MOBILITY SERVICES.

Service Map Guide

ATTACHMENT B-2

HARRIS COUNTY SERVICE AREA MAP



Evaluation Matrix

| EVALUATION CRITERIA | Score |
|---|------------|
| Responsiveness of Submittal | Pass/Fail |
| Financial Stability | Pass/Fail |
| Qualifications | 20 |
| Experience/Collaborative Initiatives | 30 |
| Proposed Program and Operational Design | 20 |
| Evaluation/Quality Management | 30 |
| TOTAL SCORE | 100 |

V. HARRIS COUNTY AREA AGENCY ON AGING SCOPE OF WORK REVIEW

- **Residential Repair**
 - **Accessibility Modifications**
 - **Weatherization**
 - **Safety and Security Modifications**
 - **Essential Appliances**
- **Chore Maintenance**

Household chores that older individual are not able to handle on their own.

(refer to the scope of work for details)

VI. CLOSING REMARKS

1. Review RFQ Submission Instructions/Contents
2. Notarized & Signed in blue ink original page of the Offer & Submittal
3. No Contact/Quiet Period

SOLICITATION SCHEDULE

Listed below are key dates for this Request for Qualifications (RFQ):

EVENT

Date of RFQ Issued
Pre-Submittal Conference
Questions from Respondents Due to City
Submittal Due from Respondents

DATE

June 25, 2021
July 13, 2021 @ 9:30 A.M.
July 16, 2021 @ 4:00 P.M.
August 5, 2021 @ 2:00 P.M.



**Thank you for
attending!**